PART B-FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450

or Fax (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

| | | | | | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | |
|---|--|--|------------------|--------------------------------|--|--|--|
| | | | | | | | (Depositor's name) |
| | | | | | | | (Signature) |
| | | | | | | | (Date) |
| APPLICATION NO. | FILING DATE | | | | OR | ATTORNEY DOCKET N | IO. CONFIRMATION NO. |
| 10/714,449 | 11/17/2003 | 11/17/2003 | | Carlos A. Melo | | 42597-193226 | 9366 |
| TITLE OF INVENTION: METHOD TO INDUCE NEOVASCULAR FORMATION AND TISSUE REGENERATION | | | | | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | | PUBLICA | TION FEE | TOTAL FEE(S) DUE | DATE DUE |
| Non-Provisional | NO YES | \$1510.00 -\$755.00 | | \$30 | 00.00 | \$1810.00 \$\$1055.00 | 06/18/2009 |
| EXAMINER | | ART UN | ART UNIT CLASS-S | | UBCLASS | | |
| S. Kaushal 1 | | | | ~~~ |)44000 | | |
| 1. Change of corresponde Address" (37 CFR 1.363) Change of corres Correspondence A "Fee Address" ind form PTO/SB/47; Use of a Custome | Change of 22) attached. s" Indication ent) attached. | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 Venable LLP Nancy J. Axelrod, Ph.D. Michael A. Gollin | | | | | |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Sterrenbeld Biotechnologie North America, Inc. Fundacion Universitaria Dr. Rene G. Favaloro Buenos Aires, Argentina Please check the appropriate assignee category or categories (will not be printed on the patent): Individual X Corporation or other private group entity Government | | | | | | | |
| 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): | | | | | | | |
| X Issue Fee A check in the amount of the fee(s) is enclosed. | | | | | | | |
| x Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. | | | | | | | |
| Advance Order -# of Copies X The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 22-0261 | | | | | | | |
| 5. Change in Entity Status (from status indicated above) | | | | | | | |
| x a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). | | | | | | | |
| The Director of the USPTO is NOTE: The Issue Fee and Punterest as shown by the recor | ıblication Fee (įf required | will not be accord | epted from a | (if any) or to ranyone other t | e-apply any prev han the applicar | viously paid issue fee to the apt; a registered attorney or ag | pplication identified above. ent; or the assignee or other party in |
| Authorized Signature // May Axelw | | | | | | Date | June 18, 2009 |
| Typed or printed name | | Nancy J. Axelrod, Ph.D. | | | | Registration No. | 44,014 |